## BRUNSWICK COUNTY DIXIE BOYS BASEBALL REGISTRATION REGISTER DECEMBER 1<sup>5T</sup> - MARCH 2<sup>N</sup>

8:30 a.m. till 5:00 p.m. Monday – Friday. Building M Government Complex

ANY PLAYER WHOSE 13<sup>TH</sup> BIRTHDAY FALLS BEFORE MAY 1<sup>ST</sup> 2012 AND ANY PLAYER WHOSE 15<sup>TH</sup> BIRTHDAY FALLS ON OR AFTER MAY 1<sup>ST</sup> 2013 IS ELIGIBLE TO COMPETE.

NEED A COPY OF BIRTH CERTIFICATE AND PARENT OR GUARDIAN TO REGISTER.

**BIRTH CERTIFICATE IS MANDATORY** 

**REGISTRATION FEE IS \$50.00** 

## **STATE CHAMPIONS**

**JUNIOR DIXIE BOYS** 

**2006 – 2008 – 2011 – 2012** 

**DIXIE BOYS** 

2007 **– 2009 – 201**0 – 2011







CONTACT PERSON – BRIAN MOORE 910.253.2670 or <a href="mailto:bmoore@brunsco.net">bmoore@brunsco.net</a>

mail to:

BRUNSWICK COUNTY PARKS & RECREATION
P.O. BOX 249-BOLIVIA, N.C. 28422
FAX – 910.253.2684

www.brunsco.net





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## **ATHLETIC REGISTRATION FORM**

**Brunswick County Parks & Recreation Departmen** 



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NAME: (LAST)	S & MA	(FIRST)	5	(MIDDLE)
BIRTHDATE:				AGE:
(MONTH)	(DAY)	(YEAR)		a de de la constante
MAILING ADDRESS:			-	
	(STREET	or P.O. BOX)		
PHONE: ( )		(ZIP)	EMERGENCY: (	
EMAIL:		@		UCL
SCHOOL:		GRADE:	PREVIOUS TEAM:	AC
JOHOULI		OKAPLI	REVIOUS   LAM.	
IT IS NOT GUARANTEED THAT YOU (THIS IS A DIXIE BASEBALL RULE.) YOUR CHILD <b>MUST</b> PLAY DIXIE BO WILL BE ABLE TO PLAY FOR THE N	DYS BASEBALL WHERE HE PLAYED I EXT CLOSEST TEAM IN THE AREA.	EAM AS LAST YEA	R. THE MAXIMUM NUMBER C	OF 14 YEAR OLDS ON A TEÂM IS 8.
	EXT CLOSEST TEAM IN THE AREA. above named candidate for a positive sactivities during the current seasoivities, and I/WE do hereby waive reball League and its Associations, the	ion on any of the I on. I/WE assume elease, absolve, in ne sponsors, super	Dixie Boys teams, hereby give all risks and hazards incidenta demnity and agree to hold ha visors, participants, volunteers	MY/OUR approval to his/her al to such participation including irmless the Brunswick County s and persons transporting
activity to MY/OUR child. I/WE and				property sustained in the above
EQUIPMENT: AS A PARENT OR GUARDIAN, I ASS PROGRAM. NO ALTERATIONS TO A OR EVENT OF THIS PROGRAM OR I	NY UNIFORM OR EQUIPMENT ARE	ALLOWED. UNIFO		
PARENTAL MEDICAL TREATMENT physician to render such medical treatment of the such medical treatm	IT AUTHORIZATION: In the even	nt of injury to MY/0 n deems necessary	OUR child, I/WE hereby grant y under the circumstances.	authority to a qualified paramedic,
PICTURE CONSENT FOR FILM / program advertisements, video for	WEBSITE / ADVERTISEMENTS: purposes of televising games and an	: I/WE give permis	ssion to have my child's pictur used strictly to promote Bruns	e on the BCP&R/league web site, wick County Dixie Baseball.
PLEASE MAIL COMPLETED FOR FAX: (910) 253-2684 (REGISTR RECEIVED BEFORE ANY PARTIC above	RATIONS MUST BE COMPLETED	& SIGNED/FEE I	PAID/& A COPY OF PARTI	CIPANTS BIRTH CERTIFICATE
PARENT OR GUARDIAN			DATE	
TAKENT OK GUANDIAN	DIXIE YOUTH	LEAGUE PLAY		
Leland □ Town	Creek ☐ Southport-Oak Isla	and □ Lockwo	od Folly ☐ Shallotte ☐	Waccamaw □
Have	e You Moved? □ Yes □ No	Where:		

Do You Want To Play In New Location Where You Moved? ☐ Yes ☐ No